

SCC eFile	2014 ANNUAL REPORT COMMONWEALTH OF VIRGINIA STATE CORPORATION COMMISSION	214526785			
<div style="display: flex; justify-content: space-between;"> <div style="width: 60%;"> <p>1.) CORPORATION NAME: Community Opportunities (Co-Op), Inc.</p> <p>2.) VA REGISTERED AGENT NAME AND OFFICE ADDRESS: MAC MCARTHUR-FOX 2155 CRAIG CREEK RD. BLACKSBURG, VA</p> <p>3.) CITY OR COUNTY OF VA REGISTERED OFFICE: MONTGOMERY COUNTY</p> <p>4.) STATE OR COUNTRY OF INCORPORATION: VA</p> </div> <div style="width: 35%;"> <p>DUE DATE: 4/30/2014</p> <p>SCC ID NO: 05568076</p> <p>5.) STOCK INFORMATION</p> <table border="1" style="width: 100%; border-collapse: collapse;"> <tr> <td style="width: 50%;">CLASS</td> <td style="width: 50%;">AUTHORIZED</td> </tr> </table> </div> </div>			CLASS	AUTHORIZED	
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<p>6.) PRINCIPAL OFFICE ADDRESS:</p> <p style="margin-left: 40px;">ADDRESS: 1417 Highland Circle</p> <p style="margin-left: 40px;">CITY/ST/ZIP: BLACKSBURG, VA 24060</p>					
<p>7.) DIRECTORS AND PRINCIPAL OFFICERS: All directors and principal officers must be listed. An individual may be designated as both a director and an officer.</p>					
<table style="width: 100%; border-collapse: collapse;"> <tr> <td style="width: 50%; vertical-align: top;"> NAME: CHRIS BURTON CADWALLADER TITLE: PRESIDENT ADDRESS: 1417 HIGHLAND CIRCLE SE CITY/ST/ZIP/CO: BLACKSBURG, VA 24060 </td> <td style="width: 5%; text-align: center; vertical-align: top;"> <input checked="" type="checkbox"/> </td> <td style="width: 40%; text-align: center; vertical-align: top;"> OFFICER <input checked="" type="checkbox"/> DIRECTOR </td> </tr> </table>			NAME: CHRIS BURTON CADWALLADER TITLE: PRESIDENT ADDRESS: 1417 HIGHLAND CIRCLE SE CITY/ST/ZIP/CO: BLACKSBURG, VA 24060	<input checked="" type="checkbox"/>	OFFICER <input checked="" type="checkbox"/> DIRECTOR
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NAME:	Frank Gwazdauskas	<input checked="" type="checkbox"/> OFFICER	<input type="checkbox"/> DIRECTOR
TITLE:	TREASURER		
ADDRESS:	805 Summit Dr.		
CITY/ST/ZIP/CO:	Blacksburg, VA 24060		
NAME:	Sonyan Jones	<input type="checkbox"/> OFFICER	<input checked="" type="checkbox"/> DIRECTOR
TITLE:	DIRECTOR		
ADDRESS:	125 Windrush Ln		
CITY/ST/ZIP/CO:	Newport, VA 24128		
NAME:	Robert Metz	<input type="checkbox"/> OFFICER	<input checked="" type="checkbox"/> DIRECTOR
TITLE:	DIRECTOR		
ADDRESS:	1316 Grissom Ln		
CITY/ST/ZIP/CO:	Blacksburg, VA 24060		
NAME:	Phyllis Rettig	<input type="checkbox"/> OFFICER	<input checked="" type="checkbox"/> DIRECTOR
TITLE:	DIRECTOR		
ADDRESS:	302 Woodbine Dr.		
CITY/ST/ZIP/CO:	Blacksburg, VA 24060		
NAME:	Judy Rowe	<input type="checkbox"/> OFFICER	<input checked="" type="checkbox"/> DIRECTOR
TITLE:	DIRECTOR		
ADDRESS:	980 Cardinal Dr		
CITY/ST/ZIP/CO:	Blacksburg, VA 24060		
NAME:	Ches Wallace	<input type="checkbox"/> OFFICER	<input checked="" type="checkbox"/> DIRECTOR
TITLE:	DIRECTOR		
ADDRESS:	3336 McEver Rd.		
CITY/ST/ZIP/CO:	Blacksburg, VA 24060		
I AFFIRM THAT THE INFORMATION CONTAINED IN THIS ELECTRONIC REPORT IS ACCURATE AND COMPLETE AS OF THE DATE BELOW AND THAT I AM LEGALLY AUTHORIZED TO SIGN THIS REPORT.			
/s/ CHRIS BURTON CADWALLADER	CHRIS BURTON CADWALLADER, PRESIDENT	5/27/2014	
SIGNATURE OF DIRECTOR/OFFICER LISTED IN THIS REPORT	PRINTED NAME AND CORPORATE TITLE	DATE	
It is a Class 1 misdemeanor for any person to sign a document, which includes this electronic record, that is false in any material respect with the intent that the document be delivered to the Commission for filing.			